

Minutes

ETHNIC HEALTH ADVISORY COMMITTEE

November 14, 2005
5:00 – 7:00 PM
Cannon Health Building
288 North 1460 West
Room 114
538-6901 or 538-9457

Members	Bill Afeaki Sam Folau Heru Hendarto Aida Santos Mattingley Dena Ned Sylvia Garcia Rickard Luz Robles Betty Sawyer Ellen Selu K. Kumar Shah Jesse Soriano Suri Suddhiphayak	Patti Fuhriman Elizabeth Heath Melanie Preece Kathryn Rowley Nasrin Zandkarimi Melissa Zito	April Young Bennett George Delavan Owen Quiñonez	Kyum Koo Chon Mary Catherine Jones Robert Kagabo Sabrina Morales William Greer
Excused	Jesse Soriano	Melanie Preece	George Delavan	William Greer
Attendees:	Sam Folau Heru Hendarto Aida Santos Mattingley Sylvia Garcia Richard (conf call) Luz Robles Ellen Selu K. Kumar Shah Suri Suddhiphayak	Elizabeth Heath Kathryn Rowley Nasrin Zandkarimi Melissa Zito	April Young Bennett Owen Quiñonez	Kyum Koo Chon Mary Catherine Jones Robert Kagabo Sabrina Morales Presenters: Deborah Turner Norm Thurston Don Beckwith
Attachments	It's All About the 10%; Business Leader Feedback Form			
Links	Culturally Competent Care Curriculum https://cccm.thinkculturalhealth.org/ (also available hard copy from Owen); Primary Care Grants Information http://health.utah.gov/primarycare/grants.html			

Agenda topics

1.	Call to order, welcome, introduction	K. Kumar Shah
Boxed dinners were provided by African Restaurant, 1878 S Redwood Rd, (801) 978-9673		
2.	Review, follow up and approval of September 12, 2005 minutes	K. Kumar Shah
<p>Discussion: Motion: Kumar moved to postpone approval of meeting minutes. Heru seconded the motion. The motion was approved.</p> <p>Conclusions: None</p> <p>Action Items: None</p>		
3.	EHAC focus 2005-2006 Director of Government and Professional Affairs Medical Uninsured Initiative	Deborah Turner, Norm Thurston
<p>Discussion: Deborah Turner and Norm Thurston discussed the Huntsman Initiative on health insurance for the uninsured. All members in attendance received a handout titled, "It's All About the 10%." On the reverse sign of this form, there was a survey titled "Business Leader Feedback Forum." Presenters requested that EHAC members complete this form and return it to them.</p> <ol style="list-style-type: none"> In May 2005, a summit was held to discuss the problem of uninsured in UT. Who the uninsured are in UT: This office does health surveys to determine the number of uninsured. 10.2% of Utahns do not have insurance. Workgroup wants to cut this number in half by 2010, enrolling people in private health insurance plans in the next 5 years. Demographics of uninsured population: Largest number is white, male, ages 19-24, high school diploma, full time job, household income between \$25-45K. This agency has worked with the Health Insurance Situation to try to survey for more details on the uninsured population and determine what factors affect their not having health insurance. Subgroups: children under 18 and ethnic minorities are key focus of this initiative. Why employers should care: Employers should have an interest in this initiative because by offering insurance they can maintain employees longer and improve the health and productivity of employees. If children have health insurance, workers miss fewer days to provide care for sick children. Employers also benefit from the initiative because they can actively help improve overall health and increase their competitiveness as potential employers (issue of fairness). Ethnic groups "can get involved to control their own destiny." Areas for improvement in health coverage: Dependent coverage goes up to age 26. Initiative would like to extend this from age 26 to 30. A lot of uninsured are students. BYU requires health insurance. Other universities have optional health insurance. The Initiative would help universities get coverage to all students. University of Utah student association brought this concern to the Initiative and would like to see something happen. It is unknown when mandatory insurance for college students would be implemented, but it is being discussed currently. Having the health insurance available to all would force the cost down for individuals. Majority of uninsured students are in the 19-34 age groups. Ethnic populations: people are eligible for programs but are not enrolling. Aggressive marketing is needed to get the programs to ethnic communities. Initiative is making efforts to reach the largest group, whites, but also ethnic minorities and children. The survey needs to improve data collection about ethnic minority groups. Presenters said that they very much want to address all ethnic groups and that they need help with involving members from all ethnic communities. Methodology: Betty Sawyer pointed out that the phone survey misses individuals who have cell phones and those who do not have phones, and that African Americans could be missed by this methodology. Presenters responded that they wanted to do door-to-door surveys or other alternate methodologies to reach their target group. Kumar pointed out that more expensive surveys and more accurate data could take money away from the program. Presenters clarified that they would like to look for new financial sources to fund surveys and data collection, but that they would like partners. Long-term solutions: What do we want Utah health insurance industry to do for the next five years? This initiative can get the governor behind it to enforce change. Some ideas proposed have been tax credits to employers or individuals, expanding Medicaid, employer mandates, penalties for not employers offering insurance, have a state-run health insurance programs. Another option, that is likely to happen, is that more money would be pooled to reach eligible ethnic minorities with insurance coverage. Ethnic chambers of commerce will meet to discuss how they can support coverage, particularly for small business owners. A plan will be in place by August 2006 and be proposed to the Utah Legislature for the 2007 session. Partners: Workgroup is already in place, mostly state staff, Luz participates on this group. There is some discussion about addressing undocumented immigrants, but the initiative would be unlikely to hit this issue head on due to limited resources and time. Dena Ned recommended that the Initiative involve Utah tribal leaders to 		

- address American Indian/Alaska Native needs.
- k) Other issues: Owen raised that some ethnic community members do not value health insurance due to lack of cultural competency of healthcare providers.
 - l) Summary: This initiative is looking to cover the 10% uninsured with some kind of coverage, which could be public or private. By 2010, the Initiative would like to reduce the percentage of uninsured to 5%, which will include ethnic minorities. The initiative would like feedback on how to reach ethnic minorities.

Conclusions: Seek alternate funding sources for door-to-door surveys or other alternate methodologies to learn more about uninsured ethnic populations. Ensure that targeted outreach to all ethnic and racial minority groups occurs and that focus on the largest group of uninsured individuals, young white males, does not detract from increasing minority coverage as well. Involve Utah tribal leaders. Look for cultural competency issues that may prevent health coverage enrollment.

Action Items:		Person Responsible	Deadline
Send out the handout to all EHAC members.		Owen	with minutes
Fill out Business Leader Feedback Form to provide input to Governor's initiative		All EHAC members	?
4.	Update from: <ul style="list-style-type: none"> ▪ Utah Department of Health: Hot topics—Not completed because Dr. Delevan was not present 		
	<ul style="list-style-type: none"> ▪ Center for Multicultural Health—Owen introduced April Bennett, who has been hired to fill the Multicultural Health Specialist position. April has been at UDOH for more than two years in the tobacco control program. ▪ The Center for Multicultural Health received \$148,000 out of the \$175,000 requested from the State Partnership Grant through the Office of Minority Health. Owen added that CMH will be accepting applications for a new full-time Health Program Specialist II position. 		Owen Quiñonez
	<ul style="list-style-type: none"> ▪ Description of State Primary Care Grants Program FY 2006 <ul style="list-style-type: none"> ○ This funding comes from state general funds. Don handed out a news release on this program and on workforce financial assistance program. The state primary care program has about \$1 million to provide for primary care through grants. It sends out 550+ applications to agencies across the state in May and will have a question-answer session in July, then make decisions shortly thereafter. There is a committee that reviews applications according to a scoring system. More information about this program is available on the website: http://health.utah.gov/primarycare ○ Program has funded urban and rural projects, community health centers, dental programs, diabetes control, 2 urban homeless programs (Wasatch Homeless Health Care and Salt Lake Donated Dental). There is a handout of funded agencies and scoring criteria. Don pointed out that reaching ethnic minorities is one of the scoring criteria. Eligible programs provide preventive services, radiological and diagnostic services, emergency care, and preventive dental care. An application is available on the website. Projects tend to be small. Grants vary, with the smallest award around \$5,000. ○ Discussion: Luz Robles recommended that Don speak with Utah Issues to coordinate efforts to get primary care to populations in need and to increase funding. Agnes from Utah Issues stated that her organization will request an additional \$600,000 from the Legislature that organizations can apply for to implement cultural competence and linguistic assistance in primary care offices. 		Don Beckwith
Action Items:		Person Responsible	Deadline
Disseminate the website link by e-mail to EHAC members		Owen Quiñonez	With minutes
5.	Review nominations of vacancy positions—not completed because Bill Afeaki was not present.		
6.	Public Comment/upcoming events <ol style="list-style-type: none"> 1. Betty Sawyer stated that the Great American Smokeout will be held November 17, 2005. 2. Nasrin reminded EHAC members to get their flu shots. Hotline: 18002750859 for flu shot clinics available in your neighborhood. Shots range from \$20-30. Midvale health clinic is also offering flu shots. 3. Owen reminded EHAC members to take handout on cultural competency. 		

7.	Adjourn and next meeting – January 9, 2006	
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